

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Scott Pinsonnault et al. :
Serial No.: 10/820,425 : Art Unit: 3629
Filed: April 8, 2004 : Examiner: Carter, Candice D.
For: WEB-BASED METHODS :
AND SYSTEMS FOR :
EXCHANGING :
INFORMATION AMONG :
PARTNERS :

**Mail Stop: RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

TRANSMITTAL

1. Transmitted herewith is:
Transmittal (3 pages)
Amendment in response to Office Action dated August 17, 2009 (41 pages)

STATUS

2. Applicant
☐ claims small entity status.
☒ is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☒ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 130.00	\$ 65.00
<input type="checkbox"/> second month	\$ 490.00	\$ 245.00
<input checked="" type="checkbox"/> third month	\$ 1,110.00	\$ 555.00
<input type="checkbox"/> fourth month	\$ 1,730.00	\$ 865.00
<input type="checkbox"/> fifth month	\$ 2,350.00	\$1,175.00
	Fee Due	<u>\$ 1,110.00</u>

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension of _____ months has already been secured. The fee paid therefor \$_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$

OR

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
	MINUS			=			
TOTAL INDEP.		MINUS		=	x \$26.00 = \$		x \$52.00 = \$
		MINUS		=	x \$110.00 = \$		x \$220.00 = \$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$195.00 = \$		+ \$390.00 = \$
					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

- (a) ☒ No additional fee for Claims is required

OR

- (b) ☐ Total additional fee for claims required \$

FEE PAYMENT

5. Attached is a check in the sum of \$

- ☒ Charge Deposit Account No. 01-2384 the sum of \$1,110.00
A duplicate of this transmittal is attached.

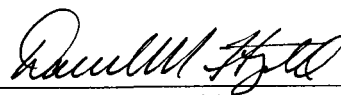
FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. ☐ Other:



Daniel M. Fitzgerald
Reg. No. 38,880
ARMSTRONG TEASDALE LLP
One Metropolitan Square, Suite 2600
St. Louis, MO 63102
314/621-5070